

Barefoot Beachcombers - 3rd Annual Cruise

Holland America "ms Veendam"

14 Day Southern Caribbean & Panama Canal

January 19th – February 2nd 2017

PLEASE PRINT ALL INFORMATION

NAME AS IT APPEARS ON PASSPORT:

1st Passenger _____ Date of Birth _____

Country of Birth _____ Country of Residency _____

Mariner Society Past Guest Number _____

Passport # _____ Issue Date _____ Expiration Date _____

2nd Passenger _____ Date of Birth _____

Country of Birth _____ Country of Residency _____

Mariner Society Past Guest Number _____

Passport # _____ Issue Date _____ Expiration Date _____

EMERGENCY CONTACT person while traveling:

Name _____ Relationship _____ Phone # _____

Special Needs: Please list any Dietary requirements, Allergies, Medical Conditions or Disabilities for all passengers:

Official Billing Address:

Street: _____ Apt. no: _____

City: _____ State: _____ Zip _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Cabin Choice: I / We wish to book: ___ Interior Cabin ___ Ocean View Cabin ___ Vista Suite ___ Neptune Suite

Bed Configuration for cabin: ___ Queen Bed ___ 2 Twin Beds

Dining Time Preference: ___ Early Dining (5:45pm) ___ Late Dining (8:00pm) ___ Anytime Dining (5:15 - 9:00pm)

Seat me/us with: _____

Travel Insurance: I / We wish to purchase optional Travel Insurance at the rate of (Based on Double Occupancy):

Interior Cabin \$140/person ___ Vista Suite Cabin \$291/person ___

Ocean View Cabin \$173/person ___ Neptune Suite Cabin \$633/person ___

(Insurance payment due with Final Payment – November 1st, 2016)

Payment Method: Check no. _____ -OR- Credit Card: ___ Visa ___ MasterCard ___ Discover ___ AMEX

DEPOSIT - \$300 per person due at time of booking. Deposit is fully 100% refundable until **November 1st, 2016**.

___ Check is enclosed for Deposit, OR

___ I / We Authorize Yankee Trails World Travel to charge \$ _____ for DEPOSIT to credit card listed below.

Credit Card Number: _____ Exp: _____ Sec. Code: _____

Name as appears on Credit Card: _____

Final payment due no later than November 1st, 2016

___ Please charge FINAL PAYMENT due on **November 1st, 2016** automatically to credit card listed above, OR

___ Do not automatically use credit card for final. I / We will call with final payment or send a check.

Signature _____ Date _____

Mail or Email Reservation To:
Yankee Trails World Travel

569 Third Avenue Extension, Rensselaer, NY 12144

The Villages Local No. (352) 633-4643 ext. 221 Email: sdevane@YankeeTrails.com

Visit Our Web: www.YankeeTrails.com